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**\*\* CONTINUING DATA \*\*\*\*\***  
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JAPAN	SHEETS DRAWING 2	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>KM</i>					

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